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| Fill in this information to identify your case: | | |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | - | |
| Case number (if known) | Chapter you are filing under: | |
| | ■ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | tt 1: Identify Yourself | | | | |
|-----|---|--|---|---------------------------|----------------|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | a Joint Case): |
| 1. | Your full name | | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). | Christine First name M. Middle name | First name Middle name | | |
| | Bring your picture identification to your meeting with the trustee. | Swanson Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) | ıffix (Sr., Jr., II, III) | |
| 2. | All other names you ha used in the last 8 years | | | | |
| | Include your married or maiden names. | | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-3679 | | | |

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Debtor 1 Christine M. Swanson

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | |
|--|---|---|--|--|--|--|
| Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | | ■ I have not used any business name or EINs. | ☐ I have not used any business name or EINs. | | | |
| | Include trade names and doing business as names | Business name(s) | Business name(s) | | | |
| | | EINs | EINs | | | |
| 5. | Where you live | 6113 Knoll Wood Rd., Apt. 105 | If Debtor 2 lives at a different address: | | | |
| | | Willowbrook, IL 60527 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | | |
| | | DuPage | | | | |
| | | County | County | | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | | |
| ò. | Why you are choosing this district to file for | Check one: | Check one: | | | |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |
| | | | | | | |

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Case number (if known) Debtor 1 Christine M. Swanson

| ⊃ar | t 2: Tell the Court About | Your Ba | nkruptcy Ca | ıse | | | |
|-----|---|---------|----------------------------------|--|---|--|---------|
| 7. | The chapter of the Bankruptcy Code you are | | | | of each, see <i>Notice Required by</i> f page 1 and check the appropria | v 11 U.S.C. § 342(b) for Individuals Filing for Bankrup te box. | otcy |
| | choosing to file under | ■ Ch | apter 7 | | | | |
| | | ☐ Ch | apter 11 | | | | |
| | | ☐ Ch | apter 12 | | | | |
| | | ☐ Ch | apter 13 | | | | |
| | | | | | | | |
| 3. | How you will pay the fee | | about how yo | ou may pay. Typ attorney is subi | pically, if you are paying the fee y | ck with the clerk's office in your local court for more courself, you may pay with cash, cashier's check, or rhalf, your attorney may pay with a credit card or check | noney |
| | | | | | tallments. If you choose this optots (Official Form 103A). | ion, sign and attach the Application for Individuals to | Pay |
| | | | I request that but is not req | it my fee be wa uired to, waive y | aived (You may request this option | on only if you are filing for Chapter 7. By law, a judge our income is less than 150% of the official poverty li in installments). If you choose this option, you must f | ne that |
| | | | | | | icial Form 103B) and file it with your petition. | iii out |
|). | Have you filed for bankruptcy within the | ■ No. | | | | | |
| | last 8 years? | ☐ Yes | | | | | |
| | | | District | | When | Case number | |
| | | | District | | When When | Case number | |
| | | | District | | when | Case number | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes | S. | | | | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| 11. | Do you rent your residence? | ■ No. | Go to I | ine 12. | | | |
| | residence : | ☐ Yes | s. Has yo | our landlord obta | ained an eviction judgment agair | st you and do you want to stay in your residence? | |
| | | | | No. Go to line | 12. | | |
| | | | | Yes. Fill out <i>In</i> bankruptcy per | | Judgment Against You (Form 101A) and file it with t | his |
| | | | | | | | |

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| Debtor 1 | Christine M. Swanson | Document | Page 4 of 46 | Case number (if known) | |
|----------|----------------------|----------|--------------|------------------------|--|
| | | | | | |

| Par | Report About Any Bu | sinesses | You Own | as a Sole Propriet | tor | |
|-----|---|--|------------------|-------------------------------------|---|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | | |
| | | ☐ Yes. | Name | and location of bus | iness | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | Name of business, if any | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | er, Street, City, Stat | te & ZIP Code | |
| | it to this petition. | | Check | k the appropriate bo | x to describe your business: | |
| | | | | Health Care Busin | ness (as defined in 11 U.S.C. § 101(27A)) | |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) | |
| | | | | Stockbroker (as d | efined in 11 U.S.C. § 101(53A)) | |
| | | | | Commodity Broke | er (as defined in 11 U.S.C. § 101(6)) | |
| | | | | None of the above | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B). | | | | |
| | For a definition of small | ■ No. | I am r | ot filing under Chap | oter 11. | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am fi Code. | • | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy | |
| | | ☐ Yes. | I am f | ling under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | |
| Par | t 4: Report if You Own or | Have Any | Hazardo | us Property or An | y Property That Needs Immediate Attention | |
| 14. | Do you own or have any | ■ No. | | | | |
| | property that poses or is alleged to pose a threat of imminent and identifiable hazard to | ☐ Yes. | What is | the hazard? | | |
| | public health or safety? Or do you own any property that needs | | | iate attention is why is it needed? | | |
| | immediate attention? | | . iocaca, | y io it ricodou! | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | s the property? | | |
| | ○ · · · · · · · · · · · · · · · · · · · | | | | Number, Street, City, State & Zip Code | |
| | | | | | | |

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Debtor 1 Christine M. Swanson

Swanson Case number (if known)

15. Tell the court whether you have received a briefing about credit

counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 17-17927 Doc 1 Filed 06/13/17 Entered 06/13/17 11:37:00 Desc Main Document Page 6 of 46 Case number (if known) Debtor 1 Christine M. Swanson Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7:

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11. United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Christine M. Swanson Christine M. Swanson Signature of Debtor 1 | Signature of Debtor 2 |
|---|----------------------------|
| Executed on June 13, 2017 MM / DD / YYYY | Executed on MM / DD / YYYY |

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Debtor 1 Christine M. Swanson Page 7 of 46 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ David P. | Lloyd | Date | June 13, 2017 | |
|-------------------|-----------------------|---------------|------------------------|--|
| Signature of A | Attorney for Debtor | | MM / DD / YYYY | |
| B. 11B.11 | | | | |
| David P. Llo | oya | | | |
| Printed name | | | | |
| David P. Llo | oyd, Ltd. | | | |
| Firm name | | | | |
| 615B S. La | Grange Rd. | | | |
| La Grange, | IL 60525 | | | |
| Number, Street, C | ity, State & ZIP Code | | | |
| Contact phone | 708-937-1264 | Email address | info@davidlloydlaw.com | |
| 6183542 | | | | |
| Bar number & Stat | te | | | |

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| | | Docume | ent Page 8 of 46 | |
|--------------------|--------------------------|-------------------|------------------|------------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Christine M. Swa | nson | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| if known) | | | | Check if this is an amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | | assets of what you own |
|-----|--|------------|---------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 14,920.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 14,920.00 |
| Pai | t 2: Summarize Your Liabilities | | |
| | | | liabilities nt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 665.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 130,309.58 |
| | Your total liabilities | \$ | 130,974.58 |
| Pai | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 1,465.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 2,137.00 |
| Pai | 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | r other so | chedules. |
| 7. | ■ Yes What kind of debt do you have? | | |

the court with your other schedules.

Official Form 106Sum

Summary of Yo

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

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| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
| | 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. |

0.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total cla | aim |
|--|-----------|-----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 15,619.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 15,619.00 |

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Document Page 10 of 46 Fill in this information to identify your case and this filing: Debtor 1 Christine M. Swanson Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Ford 3.1 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Escape** Creditors Who Have Claims Secured by Property. Debtor 1 only Model: 2012 Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another \$8,125.00 \$8,125.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$8,125.00 pages you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

Official Form 106A/B Schedule A/B: Property

| | Case 17-17927 Doc 1 | Filed 06/13/17 | | Desc Main |
|-------------------------------|--|---------------------------|---|--|
| Debtor 1 | Christine M. Swanson | Document | Page 11 of 46 Case number (if known) | |
| Yes. | Describe | | | |
| | Various househol | ld goods. | | \$1,000.00 |
| □ No | | | ipment; computers, printers, scanners; music | collections; electronic devices |
| | Various electronic | cs. | | \$100.00 |
| Exampl | bles of value es: Antiques and figurines; paintings, pri other collections, memorabilia, colle Describe | | ooks, pictures, or other art objects; stamp, coi | n, or baseball card collections; |
| Exampl No | ent for sports and hobbies es: Sports, photographic, exercise, and musical instruments Describe | other hobby equipment | ; bicycles, pool tables, golf clubs, skis; canoes | and kayaks; carpentry tools; |
| ■ No | ns oles: Pistols, rifles, shotguns, ammunitio Describe | n, and related equipme | nt | |
| □ No | s bles: Everyday clothes, furs, leather coat Describe | ts, designer wear, shoe | s, accessories | |
| | Various wearing a | apparel, including fa | ashion jewelry. | \$200.00 |
| ■ No □ Yes. 13. Non-fa Examp | Diles: Everyday jewelry, costume jewelry, Describe rm animals biles: Dogs, cats, birds, horses | engagement rings, wed | dding rings, heirloom jewelry, watches, gems, | gold, silver |
| ☐ Yes. | Describe | | | |
| ■ No | her personal and household items you | ou did not already list, | including any health aids you did not list | |
| | the dollar value of all of your entries fart 3. Write that number here | | any entries for pages you have attached | \$1,300.00 |
| | scribe Your Financial Assets | | | |
| Do you ov | vn or have any legal or equitable inter | rest in any of the follow | wing? | Current value of the portion you own? Do not deduct secured |

Official Form 106A/B Schedule A/B: Property page 2

claims or exemptions.

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Case number (if known) Document Debtor 1 Christine M. Swanson 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No ☐ Yes. 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... Checking Bank of America \$600.00 17.1. Bank of America. \$3,000.00 Savings 17.2. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ☐ No Institution name or individual: Yes. Rental deposit Dave Ecton, Landlord \$895.00 9S150 Chandelle Rd. Naperville, IL 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

No

☐ Yes.....

page 3

| | | Case 17-179 | 927 | Doc 1 | Filed 06/13/17 Document | Entered 06/13/17 11:37:00 Page 13 of 46 | Desc Main |
|----|------------------------|--|---------------------|--------------------------|---|--|--|
| D | ebtor 1 | Christine M. Sw | anso | n | Document | Case number (if known) | |
| | ☐ Yes. | Give specific inform | ation a | bout them | | | |
| 26 | | | | | ets, and other intellecturoceeds from royalties a | ual property and licensing agreements | |
| | ☐ Yes. | Give specific inform | ation a | bout them | | | |
| 27 | Exam _l ■ No | es, franchises, and oles: Building permits Give specific inform | s, exclu | isive licenses | | n holdings, liquor licenses, professional licens | es |
| M | oney or | property owed to ye | ou? | | | | Current value of the |
| | | | | | | | portion you own? Do not deduct secured claims or exemptions. |
| 28 | . Tax re | funds owed to you | | | | | |
| | | Give specific informa | ation al | bout them, inc | cluding whether you alre | ady filed the returns and the tax years | |
| 29 | Exam _l ■ No | support bles: Past due or lum Give specific informa | • | ,, , | usal support, child suppo | ort, maintenance, divorce settlement, property | settlement |
| 30 | Exam _i ■ No | amounts someone obles: Unpaid wages, benefits; unpaid | disabili d loans | ity insurance | | efits, sick pay, vacation pay, workers' compe | nsation, Social Security |
| 31 | | sts in insurance poli ples: Health, disability | | e insurance; ł | nealth savings account (| HSA); credit, homeowner's, or renter's insurar | nce |
| | ■ Yes. | Name the insurance | | any of each papany name: | olicy and list its value. | Beneficiary: | Surrender or refund value: |
| | | | Pru | dential | | | \$1,000.00 |
| 32 | If you somed | | f a livin | | someone who has die t proceeds from a life in | ed surance policy, or are currently entitled to rec | eive property because |
| 33 | Exam _l ■ No | ples: Accidents, empl | loymer | nt disputes, in | you have filed a lawsu surance claims, or rights | it or made a demand for payment s to sue | |
| 24 | | Describe each claim | | | over peture include | a counterplaime of the debter and debter to | a not off alaims |
| 34 | ■ No | contingent and unli Describe each claim | • | ea claims of | every nature, includin | g counterclaims of the debtor and rights to | O SET OTT CIAIMS |
| 35 | . Any fir | nancial assets you o | did not | t already list | | | |
| | ■ No □ Yes. | Give specific inform | ation | | | | |

Official Form 106A/B Schedule A/B: Property page 4

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Case number (if known) Document Debtor 1 **Christine M. Swanson** 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$5,495.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form

| 55. | Part 1: Total real estate, line 2 | | | | \$0.00 |
|-----|--|---|-------------|------------------------------|-------------|
| 56. | Part 2: Total vehicles, line 5 | | \$8,125.00 | | |
| 57. | Part 3: Total personal and household items, line 15 | | \$1,300.00 | | |
| 58. | Part 4: Total financial assets, line 36 | | \$5,495.00 | | |
| 59. | Part 5: Total business-related property, line 45 | | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 | + | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | | \$14,920.00 | Copy personal property total | \$14,920.00 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | | \$14,920.00 |

Official Form 106A/B Schedule A/B: Property page 5 Case 17-17927 Doc 1 Filed 06/13/17 Entered 06/13/17 11:37:00 Desc Main

| | | | 111 FAUE 1.3 UL 40 | |
|---|-------------------------|-------------------|--------------------|-----------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Christine M. Swa | nson | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | ☐ Check if this is an |
| (| | | | amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Current value of the portion you own | Amount of the exemption you claim | | Specific laws that allow exemption |
|---|-----------------------------------|---|---|
| Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| \$8,125.00 | | \$2,400.00 | 735 ILCS 5/12-1001(c) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$8,125.00 | | \$800.00 | 735 ILCS 5/12-1001(b) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$1,000.00 | | \$1,000.00 | 735 ILCS 5/12-1001(b) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$100.00 | | \$100.00 | 735 ILCS 5/12-1001(b) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$200.00 | | \$200.00 | 735 ILCS 5/12-1001(a) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| | \$8,125.00 \$1,000.00 | \$8,125.00 | Standard Schedule A/B \$8,125.00 \$8,125.00 \$1,000.00 |

Case 17-17927 Doc 1 Filed 06/13/17 Entered 06/13/17 11:37:00 Desc Main Document Page 16 of 46 Debtor 1 Christine M. Swanson Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Checking: Bank of America** 735 ILCS 5/12-1001(b) \$600.00 \$600.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Savings: Bank of America. 735 ILCS 5/12-1001(b) \$3,000.00 \$1,500.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

| Case 17-17927 | Doc 1 Filed 06 | | d 06/13/17 11:37 | 7:00 Desc M | 1ain |
|--|---|-----------------------------|---|--|-----------------------------|
| Fill in this information to identify y | | | · · · · · · · · · · · · · · · · · · · | | |
| Debtor 1 Christine M. S | Swanson | | | | |
| First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse if, filing) First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the | ne: NORTHERN DISTRI | CT OF ILLINOIS | | | |
| Case number(if known) | | | | _ | if this is an led filing |
| Official Form 106D Schedule D: Creditor | rs Who Have Cla | aims Secured | hy Property | | 12/15 |
| Be as complete and accurate as possible s needed, copy the Additional Page, fill number (if known). | e. If two married people are fil | ling together, both are equ | ially responsible for supp | | tion. If more space |
| . Do any creditors have claims secured | I by your property? | | | | |
| ☐ No. Check this box and subm | it this form to the court with v | vour other schedules. Yo | u have nothing else to r | report on this form. | |
| ■ Yes. Fill in all of the information | ĺ | , | - · · · · · · · · · · · · · · · · · · · | | |
| | on below. | | | | |
| Part 1: List All Secured Claims | | | Column A | Column B | Column C |
| List all secured claims. If a creditor hat for each claim. If more than one creditor had much as possible, list the claims in alphab | has a particular claim, list the oth | ner creditors in Part 2. As | Amount of claim Do not deduct the | Value of collateral that supports this | Unsecured portion |
| 2.1 Pnc Bank | Describe the property tha | it secures the claim: | value of collateral. 665.00 | claim Unknown | If any Unknown |
| Creditor's Name | Automobile | - | Ψοσο.σο | | |
| 2730 Liberty Ave Pittsburgh, PA 15222 | As of the date you file, the apply. Contingent | e claim is: Check all that | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all t | that apply. | | | |
| Debtor 1 only | ☐ An agreement you made | e (such as mortgage or secu | ıred | | |
| Debtor 2 only | car loan) | | | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as t | ax lien, mechanic's lien) | | | |
| ☐ At least one of the debtors and anothe | r U Judgment lien from a la | wsuit | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right | | | | |
| Opened 09/11 Last Active Date debt was incurred 4/12/17 | t | count number 6934 | | | |

Add the dollar value of your entries in Column A on this page. Write that number here: \$665.00 If this is the last page of your form, add the dollar value totals from all pages. \$665.00 Write that number here:

Last 4 digits of account number

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Date debt was incurred 4/12/17

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| | | | Document | Page 1 | 8 of 46 | | |
|---|---|--|--|---|--|--|---|
| Filli | n this inforr | mation to identify your | case: | | | | |
| Debt | tor 1 | Christine M. Swa | nson | | | | |
| | | First Name | Middle Name | Last Name | | _ | |
| Debt (Spou | tor 2 se if, filing) | First Name | Middle Name | Last Name | | _ | |
| Unite | ed States Ba | nkruptcy Court for the: | NORTHERN DISTRICT OF | ILLINOIS | | _ | |
| Case (if kno | e number _ | | | | | | Check if this is an amended filing |
| | | n 106E/F E/F: Creditors W | /ho Have Unsecure | ed Claims | | | 12/15 |
| ny ex sched sched eft. A same | xecutory cont dule G: Execu dule D: Credit ttach the Cor and case nur | tracts or unexpired leases tory Contracts and Unexp ors Who Have Claims Sec atinuation Page to this pag mber (if known). | se Part 1 for creditors with PRIO that could result in a claim. Also ired Leases (Official Form 1060 ured by Property. If more space ge. If you have no information to | so list executory of 6). Do not include e is needed, copy | contracts on Schedule any creditors with par the Part you need, fill i | A/B: Property (Officially secured claims tout, number the er | ial Form 106A/B) and on s that are listed in ntries in the boxes on the |
| Part | | II of Your PRIORITY Ur ors have priority unsecure | | | | | |
| _ | No. Go to F | • • | u ciaiins against you? | | | | |
| _ | ■ No. Go to F □ Yes. | rait 2. | | | | | |
| ا Part | | II of Your NONPRIORIT | Y Unsecured Claims | | | | |
| | | | cured claims against you? | | | | |
| | _ | | eart. Submit this form to the court v | with your other sch | odulos | | |
| | | ve nothing to report in this p | art. Submit triis form to trie court t | with your other sche | edules. | | |
| | Yes. | | | | | | |
| t | insecured claii | m, list the creditor separatel | aims in the alphabetical order or y for each claim. For each claim list the other creditors in Part 3.If y | sted, identify what t | type of claim it is. Do not | t list claims already in | cluded in Part 1. If more |
| | | | | | | | Total claim |
| 4.1 | вмо на | arris | Last 4 digits of | account number | 9356 | | \$98,655.58 |
| | c/o Ega 321 N. (| y Creditor's Name n & Alaily LLC Clark Street, Suite 14 o, IL 60654 | 130 When was the c | debt incurred? | Opened 1/20/05 5/20/14 | 5 Last Active | |
| | Number S | treet City State Zlp Code rred the debt? Check one. | As of the date y | ou file, the claim | is: Check all that apply | | |
| | Debtor | 1 only | ☐ Contingent | | | | |
| | ☐ Debtor | 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor | 1 and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At leas | st one of the debtors and an | other Type of NONPR | IORITY unsecure | d claim: | | |
| | | if this claim is for a com | • | | | | |
| | debt Is the clai | m subject to offset? | ☐ Obligations a report as priority | | ration agreement or div | orce that you did not | |
| | ■ No | | ☐ Debts to pen: | sion or profit-sharin | g plans, and other simil | ar debts | |
| | ☐ Yes | | Other. Specif | _{fy} Deficiency | from foreclosure | | |
| | | | | | | | |

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Document Page 19 of 46 Debtor 1 Christine M. Swanson Case number (if know) 4.2 \$12,064.00 Capital One Last 4 digits of account number 5898 Nonpriority Creditor's Name Attn: Bankruptcy Opened 09/98 Last Active Po Box 30253 When was the debt incurred? 5/10/17 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.3 **CIc Svc Corp** Last 4 digits of account number 3288 Unknown Nonpriority Creditor's Name Acs Education Services/Attn: Opened 08/06 Last Active **Bankruptcy** When was the debt incurred? 4/21/08 Po Box 7051 Utica, NY 13504 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.4 \$15,619.00 Fm/clc Last 4 digits of account number 2144 Nonpriority Creditor's Name Opened 6/07/06 Last Active 121 South 13th Street When was the debt incurred? 4/03/17 Lincoln, NE 68508 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only

Doc 1 Filed 06/13/17 Entered 06/13/17 11:37:00 Desc Main Case 17-17927 Page 20 of 46 Case number (if know) Document

| Debtor | 1 Christin | e M. Swanson | | Case n | umber (if know) | |
|--------------------|--|---|---|----------------|---------------------------------------|-------------------------|
| 4.5 | Merchants | = | Last 4 digits of account number | 0412 | | \$1,778.00 |
| | Nonpriority Cr 223 W Jac Ste 700 | | When was the debt incurred? | Open | ed 01/16 | |
| | Chicago, I | L 60606 | | | | |
| - | | t City State ZIp Code | As of the date you file, the claim | is: Check | all that apply | |
| | Who incurred | the debt? Check one. | | | | |
| | Debtor 1 o | nly | ☐ Contingent | | | |
| | Debtor 2 o | nlv | ☐ Unliquidated | | | |
| | _ | nd Debtor 2 only | ☐ Disputed | | | |
| | _ | e of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| | | his claim is for a community | ☐ Student loans | | | |
| | debt | nis ciaim is for a community | | aration ad | reement or divorce that you did not | |
| | Is the claim s | subject to offset? | report as priority claims | aration agi | recinions of diverse that yet did not | |
| | ■ No | | ☐ Debts to pension or profit-sharing | ng plans, a | and other similar debts | |
| | | | Collection | Attorne | ey Adventist Hinsdale | |
| | ☐ Yes | | Other. Specify Hospital | | , , , , , , , , , , , , , , , , , , , | |
| 4.6 | Simmons | | Last 4 digits of account number | 8547 | | \$2,193.00 |
| | Nonpriority Cr. 501 S Mair | n St | When was the debt incurred? | Open 4/12/1 | ed 04/07 Last Active | |
| | Pine Bluff, | | | | | |
| | | t City State ZIp Code I the debt? Check one. | As of the date you file, the claim | is: Check | all that apply | |
| | Debtor 1 o | | ☐ Contingent | | | |
| | | • | - | | | |
| | Debtor 2 o | • | ☐ Unliquidated | | | |
| | _ | nd Debtor 2 only | ☐ Disputed | | | |
| | | e of the debtors and another | Type of NONPRIORITY unsecure | a ciaim: | | |
| | | his claim is for a community | ☐ Student loans | | | |
| | debt | subject to offset? | □ Obligations arising out of a separate of a sepa | aration agi | reement or divorce that you did not | |
| | ■ No | abject to entert | Debts to pension or profit-shari | na nlans la | and other similar debts | |
| | ☐ Yes | | ■ Other. Specify Credit Care | | and outer chimal debte | |
| | 163 | | Other. Specify | . | | |
| Part 3: | List Othe | rs to Be Notified About a Debt | That You Already Listed | | | |
| is tryir have n | ng to collect fr nore than one | rom you for a debt you owe to som | out your bankruptcy, for a debt that neone else, list the original creditor in you listed in Parts 1 or 2, list the add submit this page. | n Parts 1 | or 2, then list the collection agency | here. Similarly, if you |
| Part 4: | Add the | Amounts for Each Type of Uns | ecured Claim | | | |
| | the amounts of f unsecured c | | s. This information is for statistical I | reporting | purposes only. 28 U.S.C. §159. Add | the amounts for each |
| | | | | | Total Claim | |
| _ | 6a | . Domestic support obligations | | 6a. | \$0.00 | |
| | Total aims | | | | | |
| from Pa | | . Taxes and certain other debts | you owe the government | 6b. | \$0.00_ | |
| | 6c | · · | jury while you were intoxicated | 6c. | \$ 0.00 | |
| | 6d | . Other. Add all other priority unse | cured claims. Write that amount here. | 6d. | \$0.00 | |
| | 6e | . Total Priority. Add lines 6a throu | igh 6d. | 6e. | \$ | |
| | | | | | Total Claire | |
| | 6f. | Student loans | | 6f. | Total Claim \$ 15,619.00 | |
| | Total | | | | 10,010.00 | |
| cla from Pa | aims art 2 6g | . Obligations arising out of a sep | paration agreement or divorce that | 6a. | \$ 0.00 | |

6g.

you did not report as priority claims

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Page 21 of 46 Case number (if know) Debtor 1 Christine M. Swanson

6i.

| 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
|-----|---|-----|------------------|
| 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 114,690.58 |
| 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 130,309.58 |

Official Form 106 E/F

Case 17-17927 Doc 1 Filed 06/13/17 Entered 06/13/17 11:37:00 Desc Main

| | | 1200000 | $1 \cdot 1 \cdot$ | |
|---|-------------------------|-------------------|---|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Christine M. Swa | nson | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Dave Ecton
9S150 Chandelle Dr.
Naperville, IL 60564-9429

State what the contract or lease is for
Apartment Lease

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| | | Docume | ent Page 23 d |)T 4h | |
|---|---|---|--|---|--|
| Fill in this i | information to identify your | | | | |
| Debtor 1 | Christine M. Swa | nson | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing | g) First Name | Middle Name | Last Name | | |
| | | NORTHERN DISTRICT | | | |
| United State | es Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case numb | er | | | | Object Williams |
| (II KIIOWII) | | | | | ☐ Check if this is an amended filing |
| | | | | | · · |
| Official | Form 106H | | | | |
| Sched | ule H: Your Cod | ebtors | | | 12/15 |
| 1. Do y ■ No □ Yes 2. With Arizona ■ No. 0 □ Yes. | a, California, Idaho, Louisiana Go to line 3. Did your spouse, former spo | you are filing a joint case, or lived in a community property, Nevada, New Mexico, Puruse, or legal equivalent live | do not list either spouse coperty state or territor erto Rico, Texas, Wash with you at the time? | r y? (<i>Community propert</i> ington, and Wisconsin.) | |
| in line Form 1 out Co | 2 again as a codebtor only i | f that person is a guaran Form 106E/F), or Sched | tor or cosigner. Make | sure you have listed the 16G). Use Schedule D, | ng with you. List the person shown the creditor on Schedule D (Official Schedule E/F, or Schedule G to fill editor to whom you owe the debt as that apply: |
| | , , , , , , , , , , , , , , , , , , , | | | Official an Sofficial | oo mat apply. |
| 3.1 | lame | | | Schedule D, lin | |
| | | | | ☐ Schedule E/F, I | |
| _ | lumber Street | | | | |
| | City | State | ZIP Code | | |
| 3.2 | | | | ☐ Schedule D, lin | ne |
| | lame | | | ☐ Schedule E/F, | |
| | | | | ☐ Schedule G, lin | |
| | lumber Street | | | _ | |
| C | City | State | ZIP Code | | |

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| | | | | | | | _ | | | | |
|--------------------|---|----------------------------|----------------------|------------------------|-----------|-------|----------------|----------|--|-----------------------|-------------|
| | in this information to identify your country. Christine M. | | | | | | | | | | |
| Dei | otor 1 Christine M. | . Swanson | | | | _ | | | | | |
| | ouse, if filing) | | | | | _ | | | | | |
| Uni | ited States Bankruptcy Court for the | : NORTHERN DISTRIC | CT OF ILLIN | IOIS | | _ | | | | | |
| | se number nown) | | - | | | | ☐ An | | d filing ent showing as of the fol | | |
| 0 | fficial Form 106I | | | | | | MM | / DD/ Y | YYY | | |
| S | chedule I: Your Inc | ome | | | | | | | | | 12/15 |
| spo atta Par | plying correct information. If you use. If you are separated and you ch a separate sheet to this form. It 1: Describe Employment | ır spouse is not filing wi | ith you, do | not include | inforn | natio | on about y | our spo | use. If mo | re space i | is needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | | | Debtor 2 | or non-fili | ing spous | e |
| | If you have more than one job, | Employment status | ■ Emplo | ■ Employed | | | | ☐ Emplo | • | | |
| | attach a separate page with information about additional | Employment status | ☐ Not er | mployed | | | | □ Not er | mployed | | |
| | employers. | Occupation | Accounting Assistant | | | | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Galaxy | Home | | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 10 Davi Bellwoo | s Drive od, IL 6010 |)4 | | | | | | |
| | | How long employed t | here? | 1 year | | | | | | | |
| Pai | t 2: Give Details About Mor | nthly Income | | | | | | | | | |
| | mate monthly income as of the duse unless you are separated. | ate you file this form. If | you have no | othing to rep | ort for a | any I | line, write \$ | 0 in the | space. Incl | ude your r | non-filing |
| | ou or your non-filing spouse have mee space, attach a separate sheet to | | ombine the i | information f | or all e | mplo | oyers for th | at perso | n on the lin | es below. | If you need |
| | | | | | | | For Debto | or 1 | For Deb | tor 2 or ig spouse |) |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | | 2. | \$ | | 0.00 | \$ | N/ | <u>A</u> |
| 3. | Estimate and list monthly overt | ime pay. | | | 3. | +\$ | | 0.00 | +\$ | N/ | <u>A</u> |

0.00

N/A

Calculate gross Income. Add line 2 + line 3.

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| Debtor | 1 Chris | tine M. Swanson | - | С | ase | number (if kn | own) | | | | |
|---------------|---|---|----------------|-----|-------------------|---------------|------------|----------|---------------------|----------------|-------------------|
| | | | | | | Debtor 1 | | non | Debtor -filing s | pouse | |
| (| Copy line 4 | here | 4. | | \$_ | 0 | .00 | \$ | | N/A | <u>\</u> |
| 5. L | ist all pay | roll deductions: | | | | | | | | | |
| 5 | ia. Tax , | Medicare, and Social Security deductions | 5a | ١. | \$ | 0 | .00 | \$ | | N/A | |
| 5 | b. Man c | latory contributions for retirement plans | 5b | ١. | \$_ | 0 | .00 | \$ | | N/A | <u> </u> |
| 5 | ic. Volu i | ntary contributions for retirement plans | 5c. | | \$ | 0 | .00 | \$ | | N/A | <u> </u> |
| 5 | id. Requ | ired repayments of retirement fund loans | 5d | | \$ | 0 | .00 | \$ | | N/A | |
| | ie. Insu r | | 5e | | \$ | | .00 | \$ | | N/A | |
| | | estic support obligations | 5f. | | \$_ | | .00 | \$ | | N/A | _ |
| | J | n dues r deductions. Specify: | 5g 5h | | \$_ \$ | | .00 | + \$_ | | N/A N/A | |
| | | · · · | | i.Ŧ | Ψ_ | | | | | | _ |
| | • | yroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | ; | ⁵ — | | .00 | \$ | | N/A | _ |
| 7. (| Calculate to | otal monthly take-home pay. Subtract line 6 from line 4. | 7. | ; | \$ | 0 | .00 | \$ | | N/A | <u>\</u> |
| | a. Net i i profe Attac recei | er income regularly received: ncome from rental property and from operating a business, ession, or farm h a statement for each property and business showing gross ots, ordinary and necessary business expenses, and the total hly net income. | 8a | | \$ | 0 | 00 | \$ | | N/A | |
| 5 | | est and dividends | 8b | | \$ _ | | .00 .00 | \$ | | N/A | _ |
| | c. Fami regul Includ | by support payments that you, a non-filing spouse, or a dependent arly receive de alimony, spousal support, child support, maintenance, divorce ment, and property settlement. | | | * \$ | | .00 | \$ \$ | | N/A | _ |
| 8 | | nployment compensation | 8d | | _{\$} — | | .00 | \$- | | N/A | _ |
| | | al Security | 8e | | $\mathring{\$}^-$ | 1,465 | | \$_ | | N/A | _ |
| | Include that y Nutrit Spec | r government assistance that you regularly receive de cash assistance and the value (if known) of any non-cash assistance ou receive, such as food stamps (benefits under the Supplemental ion Assistance Program) or housing subsidies. ify: ion or retirement income | e 8f. 8g | | \$_ \$_ | | .00 | \$ \$ | | N/A N/A | |
| | J | r monthly income. Specify: | 8h | | <u> </u> | | | + \$ | | N/A | _ |
| 0 | | · · · · · · · · · · · · · · · · · · · | | [c | | | | | | | _ |
| 9. | luu ali otn | er income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | | 1,465 | .00 | \$ | | N/ | A |
| 10. (| Calculate n | nonthly income. Add line 7 + line 9. | 10. | \$ | | 1,465.00 | + \$ | | N/A | = \$ | 1,465.00 |
| | | ries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | Ť- | | 1,100.00 | | | | * - | 1,100100 |
| 11. \$ | State all other nolude consther other friends | ther regular contributions to the expenses that you list in Schedule tributions from an unmarried partner, members of your household, your sor relatives. Idea of any amounts already included in lines 2-10 or amounts that are not a series of the series of your household, your sor relatives. | depe | | | • | | | | ⇒ J. +\$ | 0.00 |
| ١ | | nount in the last column of line 10 to the amount in line 11. The resmount on the Summary of Schedules and Statistical Summary of Certain | | | | | | | 12. | \$ | 1,465.00 |
| 13. [| _ ' . | pect an increase or decrease within the year after you file this form | ? | | | | | | · | Combi month | ined ly income |
| | No. | Evolain | | | | | | | | | |

Official Form 106I Schedule I: Your Income page 2

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| Fill i | in this information to identify your case: | | 1 | | |
|-------------|---|--------------------------|---------------|---|-------------------------------|
| Debt | tor 1 Christine M. Swanson | | Che | ck if this is: | |
| | otor 2 Duse, if filing) | | | An amended filing A supplement show 13 expenses as of | wing postpetition chapter |
| ` ' | , 3, | INOIO | | | |
| Unite | ed States Bankruptcy Court for the: NORTHERN DISTRICT OF ILL | INOIS | | MM / DD / YYYY | |
| | e number nown) | | | | |
| | fficial Form 106J | | | | |
| | chedule J: Your Expenses | | | | 12/1 |
| info | as complete and accurate as possible. If two married people ormation. If more space is needed, attach another sheet to th mber (if known). Answer every question. | | | | |
| Part | Describe Your Household Is this a joint case? | | | | |
| 1. | No. Go to line 2. | | | | |
| | ☐ Yes. Does Debtor 2 live in a separate household? | | | | |
| | □ No | | | | |
| | ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expens</i> | ses for Separate House | ehold of Deb | tor 2. | |
| 2. | Do you have dependents? ■ No | | | | |
| | Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent | | | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | □ No |
| | dependents names. | | | | □ Yes □ No |
| | | | | | ☐ Yes |
| | | | | | □ No |
| | | | | | ☐ Yes |
| | | | | | □ No |
| 3. | Do your expenses include ■ No. | | | | ☐ Yes |
| Э. | expenses of people other than yourself and your dependents? | | | | |
| Б. (| <u>·</u> | | | | |
| Esti exp | t 2: Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless penses as of a date after the bankruptcy is filed. If this is a sublicable date. | | | | |
| the | lude expenses paid for with non-cash government assistance value of such assistance and have included it on <i>Schedule I</i> ficial Form 106I.) | | | Your exp | enses |
| , | · | | | | |
| 4. | The rental or home ownership expenses for your residence payments and any rent for the ground or lot. | e. Include first mortgag | e 4. § | | 915.00 |
| | If not included in line 4: | | | | |
| | 4a. Real estate taxes | | 4a. \$ | · | 0.00 |
| | 4b. Property, homeowner's, or renter's insurance | | 4b. \$ | | 15.00 |
| | 4c. Home maintenance, repair, and upkeep expenses | | 4c. \$ | | 0.00 |
| 5. | 4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as | home equity loans | 4d. § 5. § | | 0.00 0.00 |

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| Deb | tor 1 | Christine | e M. Swanson | Case nun | mber (if known) | |
|-----|---------|---------------|--|--------------------------------|-----------------|-------------------------------|
| 6. | Utiliti | ies: | | | | |
| • | 6a. | | , heat, natural gas | 6a. | . \$ | 30.00 |
| | 6b. | | wer, garbage collection | 6b. | . \$ | 0.00 |
| | 6c. | Telephone | e, cell phone, Internet, satellite, and cable services | 6c. | . \$ | 179.00 |
| | 6d. | Other. Sp | ecify: | 6d. | . \$ | 0.00 |
| 7. | Food | d and hous | ekeeping supplies | 7. | . \$ | 250.00 |
| 8. | | | children's education costs | 8. | . \$ | 0.00 |
| 9. | Cloth | hing, laund | ry, and dry cleaning | 9. | . \$ | 0.00 |
| 10. | Perso | onal care p | products and services | 10. | . \$ | 0.00 |
| | | | ntal expenses | 11. | . \$ | 50.00 |
| | | | Include gas, maintenance, bus or train fare. | | • | |
| | | | ar payments. | 12. | . \$ | 120.00 |
| 13. | Ente | rtainment, | clubs, recreation, newspapers, magazines, and books | 13. | . \$ | 0.00 |
| 14. | Char | itable cont | ributions and religious donations | 14. | . \$ | 0.00 |
| 15. | Insur | rance. | | | | |
| | | | surance deducted from your pay or included in lines 4 or 20. | | | |
| | 15a. | Life insura | ance | 15a. | | 0.00 |
| | 15b. | Health ins | urance | 15b. | . \$ | 156.00 |
| | 15c. | Vehicle in | surance | 15c. | . \$ | 90.00 |
| | 15d. | Other insu | ırance. Specify: | 15d. | . \$ | 0.00 |
| 16. | | | clude taxes deducted from your pay or included in lines 4 or 20 |). | | |
| | Spec | , | | 16. | . \$ | 0.00 |
| 17. | | | ease payments: | | | |
| | | | ents for Vehicle 1 | 17a. | | 332.00 |
| | | | ents for Vehicle 2 | 17b. | | 0.00 |
| | | Other. Spe | | 17c. | . \$ | 0.00 |
| | | Other. Spe | · | 17d. | . \$ | 0.00 |
| 18. | | | of alimony, maintenance, and support that you did not rep | | Φ. | 0.00 |
| 40 | | | your pay on line 5, Schedule I, Your Income (Official Form | 106I). | . \$ | |
| 19. | | | s you make to support others who do not live with you. | 40 | \$ | 0.00 |
| 20 | Spec | | anticonnance and included in lines 4 on F of this forms on a | 19. | | |
| 20. | | | erty expenses not included in lines 4 or 5 of this form or or s on other property | n <i>Schedule I: Y</i> 20a. | | 0.00 |
| | | Real estat | | 20a. | | 0.00 |
| | | | | 200. 20c. | · | - |
| | | | homeowner's, or renter's insurance | 20d. | | 0.00 |
| | | | nce, repair, and upkeep expenses er's association or condominium dues | | | 0.00 |
| 0.4 | | | er's association or condominium dues | 20e. | · <u> </u> | 0.00 |
| 21. | Otne | r: Specify: | | 21. | +\$ | 0.00 |
| 22. | Calcı | ulate vour | monthly expenses | | | |
| | | | through 21. | | \$ | 2,137.00 |
| | | | 2 (monthly expenses for Debtor 2), if any, from Official Form 10 |)6J-2 | \$ | |
| | | | a and 22b. The result is your monthly expenses. | | \$ | 2,137.00 |
| | 220. / | rida iiric ZZ | a and 225. The result is your monthly expenses. | | Ψ | 2,137.00 |
| 23. | Calc | ulate your | monthly net income. | | | |
| | 23a. | Copy line | 12 (your combined monthly income) from Schedule I. | 23a. | . \$ | 1,465.00 |
| | 23b. | Copy your | monthly expenses from line 22c above. | 23b. | \$ | 2,137.00 |
| | | | | | | |
| | 23c. | | our monthly expenses from your monthly income. | 00- | · | -672.00 |
| | | The result | is your monthly net income. | 23c. | . \$ | -0/2.00 |
| 0.4 | De : | | and the second s | | | |
| 24. | | | an increase or decrease in your expenses within the year a ou expect to finish paying for your car loan within the year or do you exp | | | ease or decrease because of a |
| | | | terms of your mortgage? | eor your mongage | Payment to inch | Ease of ueclease because of a |
| | ■ No | | , | | | |
| | | | Explain here: | | | |

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| Fill in this infor | mation to identify your | case: | | | |
|--|--|--------------------------|----------------------------|--|--|
| Debtor 1 | Christine M. Swa | | | | |
| Debior 1 | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| If two married p You must file th obtaining mone | eople are filing togethe is form whenever you fi y or property by fraud in | n connection with a bank | nsible for supplying core | rect information. . Making a false statem | ent, concealing property, or or imprisonment for up to 20 |
| years, or both. 1 | 18 U.S.C. §§ 152, 1341, 1 | 519, and 35/1. | | | |
| Sig | n Below | | | | |
| Did you pa | ay or agree to pay some | one who is NOT an attor | ney to help you fill out b | pankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. | Name of person | | | | ptcy Petition Preparer's Notice, nd Signature (Official Form 119) |
| | | | | Declaration, a | nd Signature (Onicial Form 119) |
| • | alty of perjury, I declare re true and correct. | that I have read the sum | mary and schedules file | d with this declaration | and |
| X /s/ Ch | ristine M. Swanson | | x | | |
| | ine M. Swanson | | Signature of | Debtor 2 | |
| Signatu | ire of Debtor 1 | | | | |
| Date | June 13, 2017 | | Date | | |

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| Fill | in this inform | nation to identify you | r case: | | | |
|--------------------|--|--|--|---|---|---|
| Deb | otor 1 | Christine M. Swa | | | | |
| Det | otor 2 | First Name | Middle Name | Last Name | | |
| | use if, filing) | First Name | Middle Name | Last Name | | |
| Uni | ted States Bar | nkruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS | | |
| Cas | a numbar | | | | | |
| | se number | | | | _ | Check if this is an mended filing |
| | ficial For | | Affairs for Individ | duals Filing for B | ankruptcy | 4/16 |
| info num Par | rmation. If months in the second seco | ore space is needed,). Answer every ques etails About Your Ma | attach a separate sheet to stion. | this form. On the top of any | equally responsible for sup y additional pages, write you | |
| 1. | wnat is your | current marital statu | IS? | | | |
| | ☐ Married | | | | | |
| | ■ Not mar | ried | | | | |
| 2. | During the la | ast 3 years, have you | lived anywhere other than | where you live now? | | |
| | □ No | | | | | |
| | Yes. List | t all of the places you l | ived in the last 3 years. Do no | ot include where you live now | <i>1</i> . | |
| | Debtor 1 Pri | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| | 7656 Parky La Grange | | From-To: 2015-2016 | ☐ Same as Debtor | I | ☐ Same as Debtor 1 From-To: |
| 3. state | ■ No □ Yes. Ma | es include Arizona, Ca | lifornia, Idaho, Louisiana, Ne hedule H: Your Codebtors (Of | vada, New Mexico, Puerto R | ity property state or territory ico, Texas, Washington and W | |
| 4. | Fill in the tota | I amount of income yo | nployment or from operatin u received from all jobs and a have income that you receive | all businesses, including part | | ndar years? |
| | □ No | | | | | |
| | Yes. Fill | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$9,000.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

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| | | | | | D.1. | | D 111 C | | |
|----|-------------------------------------|-----------------------------------|-------------------------------|---|--|--|---|-----------------------|---|
| | | | | | Debtor 1 | | Debtor 2 | | |
| | | | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apple | | Gross income (before deductions and exclusions) |
| | r last calen anuary 1 to | | | 31, 2016) | ☐ Wages, commissions, bonuses, tips | \$26,303.00 | ☐ Wages, commis bonuses, tips | ssions, | |
| | | | | | ☐ Operating a business | | Operating a bus | siness | |
| | r the calend anuary 1 to | | | | ■ Wages, commissions, bonuses, tips | \$15,727.00 | ☐ Wages, commis | ssions, | |
| | | | | | ☐ Operating a business | | ☐ Operating a bus | siness | |
| 5. | Include include and other winnings. | come public If you sourc | regard c bene i are fil | lless of wheth fit payments; ing a joint cas he gross inco | pensions; rental income; inter e and you have income that y | amples of other income are all rest; dividends; money collect you received together, list it of telly. Do not include income the | ed from lawsuits; roy nly once under Debto | valties; and or 1. | |
| | | | | | Debtor 1 | | Debtor 2 | | |
| | | | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of incom Describe below. | ne | Gross income (before deductions and exclusions) |
| | om January e date you f | | | nt year until nkruptcy: | Social Security | \$7,500.00 | | | |
| | r last calen anuary 1 to | | | 31, 2016) | Social Security | \$19,475.00 | | | |
| | r the calend anuary 1 to | | | | Social Security | \$19,475.00 | | | |
| Pa | rt 3: List | Cert | ain Pa | vments You | Made Before You Filed for | Bankruptcv | | | |
| 6. | | Deb Nei | tor 1's | or Debtor 2' | s debts primarily consume | r debts? umer debts. Consumer debts | are defined in 11 U. | S.C. § 101 | (8) as "incurred by an |
| | | | ing the No. | 90 days befo | | d you pay any creditor a total | of \$6,425* or more? | | |
| | | | Yes | List below e | ach creditor to whom you pai | id a total of \$6,425* or more in | | | |
| | | * S | ubject | | payments to an attorney for the on 4/01/19 and every 3 year | his bankruptcy case. s after that for cases filed on o | or after the date of a | djustment. | |
| | ■ Yes. | | | | r both have primarily consure you filed for bankruptcy, di | umer debts. d you pay any creditor a total | of \$600 or more? | | |
| | | | No. | Go to line 7 | | | | | |
| | | | Yes | include pay | | d a total of \$600 or more and bligations, such as child supp | | | |
| | Creditor' | e Na | me and | d Address | Dates of navme | ent Total amount | Amount you V | Vae thie n | avment for |

still owe

paid

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Case number (if known) Document Debtor 1 Christine M. Swanson

| 7. | of which you are an officer, director, person in | Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and allimony. | | | | | | | | | |
|-----|---|--|-----------------------------------|----------------------|-----------------------------------|---------------------|--|--|--|--|--|
| | ■ No | | | | | | | | | | |
| | ☐ Yes. List all payments to an insider. | | | | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for th | is payment | | | | | |
| 8. | Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosi | | ments or transfer a | ny property on a | ccount of a deb | t that benefited an | | | | | |
| | No☐ Yes. List all payments to an insider | | | | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for the | | | | | | |
| Par | rt 4: Identify Legal Actions, Repossession | s, and Foreclosures | | | | | | | | | |
| 9. | Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No | | | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | | |
| | Case title | Nature of the case | Court or agency | | Status of the | case | | | | | |
| | Case number BMO Harris Bank v. Swanson 17 MR 567 | Foreclosure deficiency | Circuit Court of DuPage County | | ■ Pending □ On appeal □ Concluded | | | | | | |
| | | | | | Judgment | | | | | | |
| 10. | Within 1 year before you filed for bankrupto Check all that apply and fill in the details below ■ No. Go to line 11. □ Yes. Fill in the information below. Creditor Name and Address | | rty repossessed, fo | oreclosed, garnis | ihed, attached, s | Value of the | | | | | |
| | | Explain what happened | 1 | | | property | | | | | |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details. | tcy, did any creditor, incl | | ancial institutior | ı, set off any am | ounts from your | | | | | |
| | Creditor Name and Address | Describe the action the | creditor took | Date taker | action was า | Amount | | | | | |
| 12. | Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an ■ No □ Yes | | rty in the possessi | on of an assigne | e for the benefit | of creditors, a | | | | | |

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Case number (if known) Document Debtor 1 Christine M. Swanson

| Par | t 5: List Certain Gifts and Contribution | s | | | |
|-----|---|----------|--|-----------------------------------|---------------------------|
| 13. | Within 2 years before you filed for bankro ■ No □ Yes. Fill in the details for each gift. | uptcy, | did you give any gifts with a total value of more t | han \$600 per person [°] | ? |
| | Gifts with a total value of more than \$60 per person | 0 | Describe the gifts | Dates you gave the gifts | Value |
| | Person to Whom You Gave the Gift and Address: | | | | |
| 14. | Within 2 years before you filed for bankro | uptcy, | did you give any gifts or contributions with a tota | al value of more than | \$600 to any charity? |
| | Yes. Fill in the details for each gift or co | ontribu | tion. | | |
| | Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code | otal | Describe what you contributed | Dates you contributed | Value |
| Par | t 6: List Certain Losses | | | | |
| 15. | Within 1 year before you filed for bankrup or gambling? No Yes. Fill in the details. | ptcy oi | r since you filed for bankruptcy, did you lose anyt | thing because of the | it, fire, other disaster, |
| | Describe the property you lost and how the loss occurred | Includ | ibe any insurance coverage for the loss e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost |
| Par | t 7: List Certain Payments or Transfers | 5 | | | |
| 16. | consulted about seeking bankruptcy or p | prepari | lid you or anyone else acting on your behalf pay or ing a bankruptcy petition? rs, or credit counseling agencies for services required | | rty to anyone you |
| | □ No | | | | |
| | Yes. Fill in the details. | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y | ou′ | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | David P. Lloyd, Ltd. 615B S. LaGrange Rd. La Grange, IL 60525 info@davidlloydlaw.com | | \$1,908: \$1,500 attorney fees; \$335 filing fee, \$40 credit counseling, \$53 credit report. | 6/2017 | \$1,908.00 |
| 17. | Within 1 year before you filed for bankrup promised to help you deal with your crect Do not include any payment or transfer that | ditors o | | or transfer any prope | rty to anyone who |
| | ■ No | | | | |
| | Yes. Fill in the details. | | | | |
| | Person Who Was Paid Address | | Description and value of any property transferred | Date payment or transfer was | Amount of payment |

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Debtor 1 Christine M. Swanson

| 18. | Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busi Include both outright transfers and transfers made include gifts and transfers that you have already li No Yes. Fill in the details. | iness or financial affa e as security (such as th | irs? ne granting of a | - | | | | | | |
|------|--|---|--------------------------|----------------------|---|---|--|--|--|--|
| | Person Who Received Transfer Address | Description and va | | paym | ibe any property or ents received or debts n exchange | Date transfer was made | | | | |
| | Person's relationship to you | | | | | | | | | |
| 19. | Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No ☐ Yes. Fill in the details. | | y property to a | self-settle | d trust or similar device o | f which you are a | | | | |
| | Name of trust | Description and va | alue of the nro | nerty trans | sferred | Date Transfer was | | | | |
| | made | | | | | | | | | |
| Pai | t 8: List of Certain Financial Accounts, Instru | uments. Safe Denosit | Boxes, and St | orage Unit | ·s | | | | | |
| . «. | 2.5t G. Gortain . manolar / Goodanto, motiv | amonto, caro zopocit | Doxoo, and or | orago oriii | | | | | | |
| 20. | Within 1 year before you filed for bankruptcy, v sold, moved, or transferred? Include checking, savings, money market, or compared to the comp | other financial accoun | its; certificates | of deposi | | , , | | | | |
| | houses, pension funds, cooperatives, associated No | tions, and other finan | ciai institution | S. | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | |
| | Name of Financial Institution and | ast 4 digits of ccount number | Type of accordinstrument | unt or | Date account was closed, sold, moved, or | Last balance before closing or transfer | | | | |
| | | | | | transferred | | | | | |
| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? | | | | | | | | | |
| | ■ No | | | | | | | | | |
| | ☐ Yes. Fill in the details. | | | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acce Address (Number, St State and ZIP Code) | | Describe | the contents | Do you still have it? | | | | |
| 22. | Have you stored property in a storage unit or p | place other than your | home within 1 | year before | re you filed for bankruptc | /? | | | | |
| | □ No | | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or h to it? Address (Number, St State and ZIP Code) | | Describe | the contents | Do you still have it? | | | | |
| | Private home of relative Branson, MO 65615 | Address Unknow Branson, Misson 65615 | | Various \$500 val | household goods ue. | □ No ■ Yes | | | | |
| | | | | | | | | | | |
| Pai | t 9: Identify Property You Hold or Control for | r Someone Else | | | | | | | | |
| 23. | Do you hold or control any property that some for someone. | eone else owns? Inclu | de any proper | ty you bor | rowed from, are storing fo | or, or hold in trust | | | | |
| | ■ No | | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the prope (Number, Street, City, St Code) | | Describe | the property | Value | | | | |
| | | , | | | | | | | | |

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Debtor 1 Christine M. Swanson

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

| Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize to own, operate, or utilize it, including disposal sites. | | | | | | | | | | |
|---|--|--|--|------------------|---|--------------------|--|--|--|--|
| | | <i>tardous material</i> means anything an env ardous material, pollutant, contaminant | | waste, hazard | ous substance, toxic s | substance, | | | | |
| Rep | ort a | II notices, releases, and proceedings th | nat you know about, regardless of when | they occurred | ı. | | | | | |
| 24. | Has | any governmental unit notified you tha | at you may be liable or potentially liable | under or in vio | plation of an environme | ental law? | | | | |
| | | No Yes. Fill in the details. | | | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | | ental law, if you | Date of notice | | | | |
| 25. | Have you notified any governmental unit of any release of hazardous material? | | | | | | | | | |
| | | No Yes. Fill in the details. | | | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | | ental law, if you | Date of notice | | | | |
| 26. | Hav | ve you been a party in any judicial or adı | ministrative proceeding under any envi | onmental law? | ? Include settlements a | and orders. | | | | |
| | | Yes. Fill in the details. | | | | | | | | |
| | | se Title se Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the | case | Status of the case | | | | |
| Pa | rt 11: | Give Details About Your Business or | Connections to Any Business | | | | | | | |
| 27. | Witl | hin 4 years before you filed for bankrup | otcy, did you own a business or have an | y of the followi | ing connections to any | y business? | | | | |
| | | ☐ A sole proprietor or self-employed i | in a trade, profession, or other activity, | either full-time | or part-time | | | | | |
| | | ☐ A member of a limited liability comp | pany (LLC) or limited liability partnersh | p (LLP) | | | | | | |
| | | ☐ A partner in a partnership | | | | | | | | |
| | | ☐ An officer, director, or managing ex | xecutive of a corporation | | | | | | | |
| | ☐ An owner of at least 5% of the voting or equity securities of a corporation | | | | | | | | | |
| | No. None of the above applies. Go to Part 12. | | | | | | | | | |
| | Yes. Check all that apply above and fill in the details below for each business. | | | | | | | | | |
| | Ad | siness Name dress mber, Street, City, State and ZIP Code) | Describe the nature of the business | | Employer Identification number Do not include Social Security number or ITIN. | | | | | |
| | (Hull | | Name of accountant or bookkeeper | Dates bu | siness existed | | | | | |
| | | | | | | | | | | |

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Case number (if known) Document Debtor 1 Christine M. Swanson 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No ☐ Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Christine M. Swanson Signature of Debtor 2 Christine M. Swanson Signature of Debtor 1 Date June 13, 2017 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

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Case 17-17927

Doc 1

Filed 06/13/17

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| Fill in this inform | ation to identify yo | UK 00001 | | | |
|---------------------------------------|---|---|------------------------------------|--|--|
| | | | | | |
| Debtor 1 | Christine M. Sv | Wanson Middle Name | Last Name | | |
| Debtor 2 | T HOC Marile | Middle Hame | Edot Name | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ban | kruptcy Court for the | e: NORTHERN DIST | RICT OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | Check if this is an amended filing |
| | | | | | |
| Official For | m 108 | | | | |
| | | ion for Indiv | iduals Filind | g Under Chapter | r 7 12/15 |
| Otatemen | t or interit | ion for marv | iddais i iiiig | j Oliaci Oliapici | 12/13 |
| If you are an indiv | ridual filing under o | hapter 7, you must fill | out this form if: | | |
| creditors have | claims secured by | your property, or | | | |
| you have lease | ed personal proper | y and the lease has no | ot expired. | | |
| | er is earlier, unles | | | cy petition or by the date set nust also send copies to the | for the meeting of creditors, creditors and lessors you list |
| | ople are filing toget d date the form. | her in a joint case, bot | h are equally respons | ible for supplying correct info | ormation. Both debtors must |
| | | sible. If more space is number (if known). | needed, attach a sepa | ırate sheet to this form. On th | ne top of any additional pages, |
| Part 1: List You | ur Creditors Who H | lave Secured Claims | | | |
| | | | | | |
| 1. For any credito information bel | • | Part 1 of Schedule D: | Creditors Who Have (| Claims Secured by Property (| Official Form 106D), fill in the |
| | ditor and the proper | ty that is collateral | What do you intend secures a debt? | to do with the property that | Did you claim the property as exempt on Schedule C? |
| | | | | | |
| Creditor's Pr | nc Bank | | ☐ Surrender the prop | perty. | □No |
| name: | | | ☐ Retain the propert | y and redeem it. | <u>_</u> |
| Description of | Automobile | | Retain the property | | ■ Yes |
| property | Additionio | | Reaffirmation Agr | | |
| securing debt: | | | Retain the property | / and [explain]. | |
| | | | | | • |
| | | onal Property Leases | n Schadula G: Evacut | ory Contracts and Unevnired | Leases (Official Form 106G), fill |
| in the information | below. Do not list | real estate leases. Une | expired leases are leas | ses that are still in effect; the sume it. 11 U.S.C. § 365(p)(2) | lease period has not yet ended. |
| Describe your un | nexpired personal p | property leases | | , | Will the lease be assumed? |
| Loccorio nomo: | | | | | П. м |
| Lessor's name: Description of leas | sed | | | | □ No |
| Property: | | | | 1 | □ Yes |
| Lancarda | | | | | _ |
| Lessor's name: Description of leas | has | | | , | □ No |
| Property: | 30u | | | 1 | ☐ Yes |
| Lessor's name: | | | | ı | □ No |

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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| Del | otor 1 | Christine M. Swanson | Case number (if known) | _ |
|------|---------------------|---|---|---|
| _ | | | | |
| | scriptior perty: | of leased | ☐ Yes | |
| | po.ty. | | □ TeS | |
| | sor's na | | □ No | |
| | scriptior perty: | of leased | П у | |
| | porty. | | ☐ Yes | |
| | sor's na | | □ No | |
| | scriptior perty: | n of leased | | |
| 1 10 | porty. | | ☐ Yes | |
| Les | sor's na | ame: | □ No | |
| | scriptior perty: | n of leased | D v | |
| 1 10 | perty. | | ☐ Yes | |
| Les | sor's na | ame: | □ No | |
| | scriptior | n of leased | | |
| FIC | репу. | | ☐ Yes | |
| Pai | t 3: | Sign Below | | |
| | | | | |
| | | alty of perjury, I declare that I have indicate at is subject to an unexpired lease. | my intention about any property of my estate that secures a debt and any personal | |
| | | · | v | |
| X | | hristine M. Swanson stine M. Swanson | X Signature of Debtor 2 | |
| | | ture of Debtor 1 | orginatale of Boston E | |
| | Ū | | | |
| | Date | June 13, 2017 | Date | |
| | | | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | | r 7: | Liquidation |
|------------|---|-------|--------------------|
| | | \$245 | filing fee |
| | | \$75 | administrative fee |
| | + | \$15 | trustee surcharge |
| | | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-17927 Doc 1 Filed 06/13/17 Entered 06/13/17 11:37:00 Desc Main Document Page 42 of 46

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In r | re Christine M. Swanson | | Case No. | | | | | |
|------|---|--|-------------------------|---------------------------------|------|--|--|--|
| | | Debtor(s) | Chapter | 7 | | | | |
| | DISCLOSURE OF COMP | ENSATION OF ATTO | RNEY FOR DI | EBTOR(S) | | | | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the fi be rendered on behalf of the debtor(s) in contemplatio | ling of the petition in bankruptcy | , or agreed to be paid | to me, for services rendered of | r to | | | |
| | For legal services, I have agreed to accept | | \$ | 0.00 | | | | |
| | Prior to the filing of this statement I have receive | d | \$ | 0.00 | | | | |
| | Balance Due | | \$ | 0.00 | | | | |
| 2. | The source of the compensation paid to me was: | | | | | | | |
| | ■ Debtor □ Other (specify): | | | | | | | |
| 3. | The source of compensation to be paid to me is: | | | | | | | |
| | ■ Debtor □ Other (specify): | | | | | | | |
| 4. | ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. | | | | | | | |
| | ☐ I have agreed to share the above-disclosed competed copy of the agreement, together with a list of the results. | | | | A | | | |
| 5. | In return for the above-disclosed fee, I have agreed to | render legal service for all aspec | ts of the bankruptcy of | ase, including: | | | | |
| | a. Analysis of the debtor's financial situation, and ren b. Preparation and filing of any petition, schedules, st c. Representation of the debtor at the meeting of cred d. [Other provisions as needed] All services required by local Rule. | atement of affairs and plan which | n may be required; | | | | | |
| 6. | By agreement with the debtor(s), the above-disclosed Representation of the debtor(s) in any | | g service: | | | | | |
| | | CERTIFICATION | | | | | | |
| this | I certify that the foregoing is a complete statement of a bankruptcy proceeding. | any agreement or arrangement for | r payment to me for r | epresentation of the debtor(s) | in | | | |
| | June 13, 2017 | /s/ David P. Lloye | d | | | | | |
| _ | Date | David P. Lloyd | | | | | | |
| | | Signature of Attorna David P. Lloyd, L | • | | | | | |
| | | 615B S. LaGrang | je Rd. | | | | | |
| | | La Grange, IL 60 708-937-1264 Fa info@davidlloyd | ax: 708-937-1265 | | | | | |

Name of law firm

David P. Lloyd

Attorney at Law 615B S. LaGrange Rd., LaGrange IL 60525 (708) 937-1264 • Fax: 708-937-1265 info@davidlloydlaw.com • www.davidlloydlaw.com

CHAPTER 7 ENGAGEMENT AGREEMENT

| | The Unite | d States 1 | Bankrupt | tcy Code | requires | that we | give you | ı a writter | 1 contrac | t that e | xplains | clearly | and |
|--------|-------------|------------|-----------|------------|----------|----------|-----------|-------------|-----------|----------|---------|---------|-------|
| conspi | cuously the | services | we will 1 | provide to | you, th | e fees a | nd charge | s for our | services, | and the | terms o | of payn | nent. |

We agree that knowing in advance what we will do for you, what we ask that you do, and how we will handle our fees and costs is a good practice. We thank you again for selecting us to represent you.

Christine M. Swanson

OUR CLIENT(S):

We have agreed to represent you in filing a Chapter 7 bankruptcy case. We agree to perform legal services for you and charge you for such services based on the time necessary to complete the matters you have asked us to handle. Our legal fees are as follows: We will charge \$___1,500.00____ to handle your Chapter 7 case, including the services noted below. In addition, we will collect and pay, on your account \$_335.00_ for the court filing fee, \$_33.00_ for a credit report, and \$_40.00_ to a credit counseling agency for their fee. For any other matters, we charge \$400/hour for the time we spend on your case. We may also charge you for expenses we incur in handling your case. Such charges may include, but may not be limited to, the following: (1) court filing fees; (2) the actual cost of photocopies and/or postage for volume mailings; (3) the actual cost of overnight, messenger, or other delivery services; (4) long distance charges; and (5) the actual cost of court reporters and transcripts. We do not charge for routine mailings or faxes.

The services we will provide include our initial interview; any additional meetings we need to have in order to get all the information we need to file your case; preparation of the petition, schedules and other required documents; ordering a credit report, valuations, or copies of documents if necessary; and any correspondence with creditors or others as needed to get the required information. After we file your case, there will be a number of other services we provide. These include corresponding with you about your case; answering your questions; corresponding with creditors as necessary; attending the meeting of creditors with you; corresponding with the Chapter 7 trustee as necessary; researching your financial situation; and advising you regarding any legal issues that arise in your Chapter 7 case.

This agreement does not include representation in courts other than the Bankruptcy Court, including any state court proceeding and the appeal of any matter. If other matters arise in your case that will require additional services, we will make every reasonable attempt to discuss them with you before we perform additional services that will involve additional fees or expenses. However, in emergency situations we may be forced to take additional actions to protect your rights without first conferring with you; in such a case we will notify you as soon as possible of the action we have taken and the charge, if any.

You understand that we will not be able to provide adequate legal representation if you fail to fully cooperate with us, fail to provide us with complete and accurate information, or fail to fulfill your obligations. You

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further understand that your failure to provide information, cooperate or fulfill your obligations may result in our having to terminate our relationship with you.

Either party may terminate this agreement with or without cause at any time upon giving written notice to the other party (although the Rules of Professional Conduct may limit my ability to discontinue representing you). The termination of this agreement will not affect your obligation to pay for the legal services we have rendered. We agree, in the event this agreement is terminated, to return to you all files in our possession provided you have paid all outstanding legal fees and expenses.

This agreement contains our full and complete understanding with respect to the subject matter hereof. This agreement supersedes all prior representations and understandings, whether written or oral.

If you agree to all the above terms, please date and sign this Agreement in the space below and return a copy, with payment of the advance. Keep a copy of this agreement for your file.

| Accepted and agreed this <u>1</u> day of <u>June</u> , 2017: |
|--|
| Christine Swanson |
| CLIENT |
| |
| Accepted and agreed this <u>1</u> day of <u>June</u> , 2017: |
| Lel CM |
| ATTORNEY / |

We are a debt relief agency. We help people file for bankruptcy relief under the Bankruptcy Code.

United States Bankruptcy Court Northern District of Illinois

| In re | Christine M. Swanson | | Case No. | | | | | | |
|-------|--|---|----------------|---------------------------|--|--|--|--|--|
| | | Debtor(s) | Chapter | 7 | | | | | |
| | VERIFICATION OF CREDITOR MATRIX | | | | | | | | |
| | | Number of C | Creditors: | 8 | | | | | |
| | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of creditor | rs is true and | correct to the best of my | | | | | |
| Date: | June 13, 2017 | /s/ Christine M. Swanson Christine M. Swanson Signature of Debtor | | | | | | | |

BMO Harris c/o Egan & Alaily LLC 321 N. Clark Street, Suite 1430 Chicago, IL 60654

Capital One Attn: Bankruptcy Po Box 30253 Salt Lake City, UT 84130

Clc Svc Corp Acs Education Services/Attn: Bankruptcy Po Box 7051 Utica, NY 13504

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